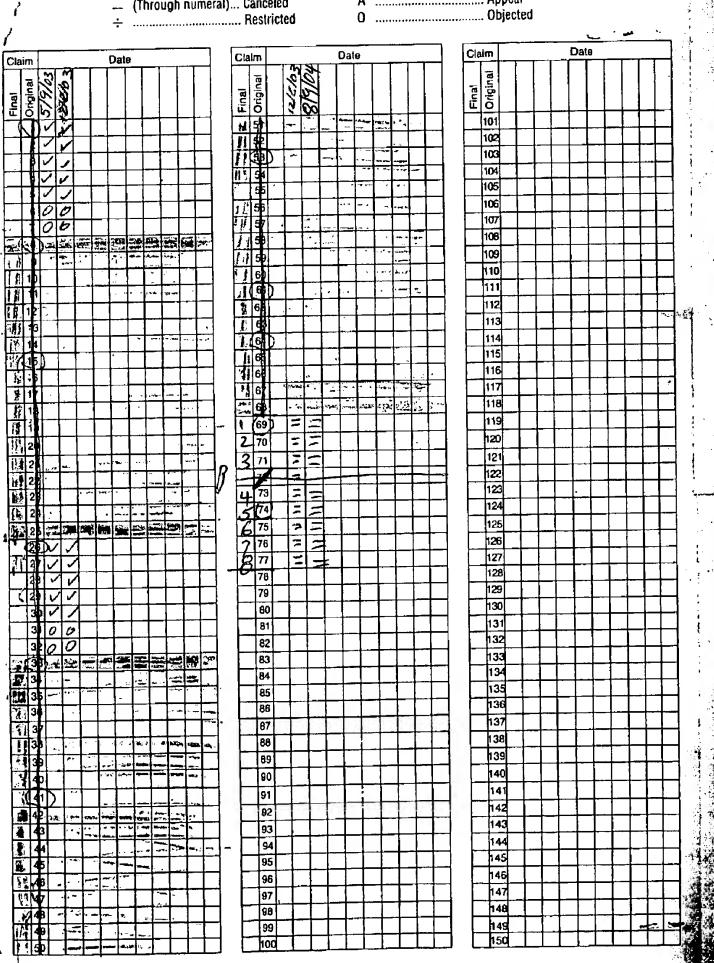
ISSUE SLIP STAPLE AREA (for additional cross references) DATE ID NO. INITIALS PUS. J. UN **FEE DETERMINATION** O.I.P.E. CLASSIFIER **FORMALITY REVIEW** RESPONSE FORMALITY REVIEW **INDEX OF CLAIMS** .....Rejected ......Interference (Through numeral)... Canceled O ..... Objected ...... Restricted Date Claim Date Claim Date Final Original 101 102 103 104



DEST AVAILABLE CODY

If more than 150 claims or 10 actions staple additional sheet here

(LEFT INSIDE)

N. S.